
CHAMPAIGN COUNTY BOARD OF HEALTH

Brookens Administrative Center
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Urbana, IL 61802

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Champaign County Board of Health

Tuesday, January 27, 2009

6:00 p.m.

Jennifer K. Putman Meeting Room (formerly Meeting Room 2)
Brookens Administrative Center, 1776 E. Washington
Urbana, Illinois

AGENDA

<u>ITEM</u>		<u>PAGE NO.</u>
A.	Call to Order	
B.	Roll Call	
C.	Approval of Agenda/Addendum	
D.	Approval of Minutes	
	1. November 25, 2008	1-8
	2. January 6, 2009	9-10
E.	Public Participation on Agenda Items Only	
F.	Correspondence and Communications	
G.	Consideration of A Method for Review of Grants & Contracts	
	1. State Grants Contracts	
	a. Local Health Protection	
	b. West Nile Virus	
	c. Bio-Terrorism	
	d. Tobacco Free Community	
	e. Portable	
	2. Mobile Unit Program	
	3. Senior Wellness Program	
	4. Perinatal Depression Program	
	5. Child Dental Access Program	
H.	Mental Health Board Collaboration	
	1. Quarterly Report from Crisis Nursery	11-12
	2. Notes from the Mental Health Board Joint Project Quarterly Planning Meeting	13-15
	3. Consideration of Funding Anti-Stigma Alliance at Ebertfest	
	4. Issues Regarding Mental Health Board (Segal)	

- I. Senior Wellness Program**
 - 1. Quarterly Report from the Regional Planning Commission 16-20
 - 2. FY2008 Final Expenses 21-23
 - 3. Issues Regarding RPC Senior Wellness Program (Scholze)

- J. Issues Regarding CUPHD**
 - 1. Report from CUPHD Administrator
 - 2. Division Monthly Reports – November & December 2008
 - a. Maternal & Child Health (Gowda)
 - b. Infectious Disease, Mobile Unit (James)
 - c. Environmental Health (Peterson)
 - d. Wellness & Health Promotion (Ramirez)

- K. Issues Regarding Smile Healthy (Kassem)**
 - 1. Monthly Report – November & December 2008

- L. Treasurer’s Report**

- M. Chronic Disease Management Video – Ramirez**

- N. Other Business**
 - 1. Request to Join the National Association of Local Board of Health

- O. Public Participation on Non-Agenda Items Only**

- P. Adjournment**

1 **CHAMPAIGN COUNTY BOARD OF HEALTH**

2
3 **Monthly Meeting**

4 **Tuesday, November 25, 2008, 6:00 p.m.**

5
6 **Call to Order & Roll Call**

7
8 The Board of Health held its monthly meeting on November 25, 2008 in Meeting Room 2
9 at the Brookens Administrative Center, 1776 East Washington, Urbana. The meeting was called
10 to order at 6:06 p.m. by Julian Rappaport. Board members Prashanth Gowda, Stan James, Nezar
11 Kassem, John Peterson, Cherryl Ramirez, Julian Rappaport, Bobbi Scholze, and Betty Segal
12 were present at the time of roll call. The staff members present were Kat Bork (Board of Health
13 Secretary) and Susan McGrath (Senior Assistant State’s Attorney). Others present were John
14 Dwyer (CUPHD Emergency Preparedness Planner), Nancy Greenwalt (Smile Healthy Executive
15 Director), Julie Pryde (CUPHD Administrator), and Jim Roberts (CUPHD Environmental Health
16 Director).

17
18 **Approval of Agenda/Addendum**

19
20 **MOTION** by James to approve the agenda and addendum; seconded by Peterson.
21 **Motion carried.**

22
23 **Approval of Minutes**

24
25 **MOTION** by Peterson to approve the Board of Health October 28, 2008 minutes;
26 seconded by James. **Motion carried.**

27
28 **Public Participation on Agenda Items Only**

29
30 There was no public participation on the agenda items.

31
32 **Correspondence and Communications**
33 **Policy with Respect to Journalism Students**

34
35 Rappaport explained that he asked for this agenda item because he receives regular
36 requests from journalism students seeking to gather information about public health. Gowda
37 added that he was interviewed by 3-4 journalism students in the last year as well. Rappaport
38 noted the students ask general questions and asked Pryde about the best way to direct students to
39 the correct information. Pryde suggested the students first be directed to the CUPHD website,
40 which has a resource for students who are writing papers. If the students’ questions cannot be
41 answered by the website then they can call Lori Holmes, the CUPHD Public Information Officer,
42 with specific questions. Regarding the possibility that students might request a large volume of
43 documents be copied, McGrath explained the Freedom of Information Act statute allows an
44 agency to figure out the copying costs and require a deposit in advance. The statute allows this
45 for requests involving an excessive number of copies and helps prevent an agency from spending
46 money on requests where people asked for numerous documents without knowing what they
47 need. Pryde noted that CUPHD posts as much information as it legally can on its website to
48 make the information more accessible to the public.

49 Rappaport informed the Board that the resolution honoring Thomas O'Rourke's service
50 as a Board of Health member was mailed to him with a card from Rappaport. O'Rourke emailed
51 Rappaport expressing his appreciation.
52

53 **Treasurer's Report**

54 **Approval of CUPHD Invoice for September 2008**

55
56 Peterson asked to know the balance of paid invoices for the year. The information could
57 not be provided at the meeting.
58

59 **MOTION** by Peterson to approve the September 2008 CUPHD invoice for payment;
60 seconded by Kassem. **Motion carried.**
61

62 Following discussion of the supporting documenting included with the invoices, the
63 Board decided in favor of only including the first two pages of the invoice in future agenda
64 packets.
65

66 **Issues Regarding CUPHD**

67 **Congratulations to Julie Pryde on Her Appointment as the CUPHD Administrator**

68
69 **MOTION** by Rappaport to formally congratulate Julie Pryde on her appointment as
70 CUPHD Administrator; seconded by Peterson. **Motion carried.**
71

72 **Environmental Health Fines Structure**

73
74 Peterson reported that he, McGrath, and Roberts met to discuss the creation of a fines
75 structure and it quickly became evident that a complete rewrite of the County's Public Health
76 Ordinance would be needed. The group intends to meet on Tuesdays before Board of Health
77 meetings and approach the Public Health Ordinance section by section to determine what
78 revisions are necessary. They hope to report to the Board with a recommendation for a revised
79 ordinance in August 2009. The costs involved in inspecting a facility were discussed at length.
80 Peterson, McGrath, and Roberts will consider the actual cost of performing an inspection in
81 Champaign County and how other counties cover these costs through fees or other means. The
82 current fee of \$25 does not cover all of the expenses involved. Peterson felt there should be fines
83 for individual businesses that operate in flagrant disregard of the Public Health Ordinance.
84 Roberts estimated the re-inspections following violations cost approximately \$75 per hour to
85 perform and take about an hour to complete. He is looking into charging the offending business
86 a fine to cover the hourly costs. On the enforcement side, there is also a need for public health
87 departments to be able to give actual fines to some businesses. Roberts acknowledged the
88 ordinance itself is out-of-date and CUPHD inspections procedures no longer exactly match the
89 ordinance. The State of Illinois coming out with revisions to the private sewage code and
90 Roberts is waiting to see what those revisions will be in order to incorporate the changes into the
91 ordinance. Peterson had an inspection sheet listing the points CUPHD looks at during an
92 inspection and stated some of the critical violations will receive a closer look by the group. The
93 revised Public Health Ordinance will need to be approved by the Board of Health and then
94 submitted to the County Board for approval.

95 Roberts confirmed CUPHD is following the enforcement section of the Public Health
96 Ordinance. Some of the details regarding hearings, such as the use of an informal consultant in
97 an effort to bring about resolution, are not reflected in the ordinance. But the Environmental
98 Health Division staff do follow the enforcement procedures concerning inspections and
99 calculating inspection scores. Roberts would like the procedures to be same for both CUPHD
100 and the Board of Health. Pryde planned to present the revisions to the CUPHD Board after the
101 review is complete to keep both entities consistent.

102

103 Adoption of Illinois Food Rules & Regulations Amendments

104

105 McGrath explained the Illinois Department of Public Health adopted significant
106 amendments to the food code, but has not decided how these changes will be implemented. The
107 Board of Health is required to adopt the amendments into its Public Health Ordinance to remain
108 in compliance.

109

110 **MOTION** by Peterson to adopt the changes to the Food Services Sanitation Code as
111 adopt by IDPH on July 10, 2008 and request the State's Attorney's Office to incorporate said
112 changes into the Public Health Ordinance; seconded by James. **Motion carried.**

113

114 Emergency Preparedness Information from John Dwyer

115

116 Dwyer reviewed the current state of emergency preparedness for Champaign County
117 concerning public health. He reported that CUPHD receives an annual grant revolving around
118 strategic planning for bio-terrorism that took a 25% cut. This grant is used for projects such as
119 running drills for medications disbursement in emergency situations. CUPHD also recently
120 received a \$578,000 Champaign Community Grant from the Center for Disease Control.
121 Luckily, the state did not get to take a cut of this grant. CUPHD learned about this grant during
122 the preparation for the Pandemic Flu Workshop in Indianapolis. The grant period started
123 October 1, 2008 and runs for one year. The grant can only be spent on training or contracts for
124 individual or agency preparedness. It cannot be spent on any equipment. CUPHD is using the
125 money to focus on continuity of services for sectors that deal directly with delivery of essential
126 healthcare services. Dwyer is in the progress of working with the group that went to the
127 Pandemic Flu Workshop on planning for a pandemic flu emergency. The effects of such a
128 public health emergency will last for a longer period of time than a natural disaster like a
129 tornado. They are soliciting plans from contractors for continuity of operation plans.

130

131 James asked if Bill Keller, the Champaign County Emergency Management Agency
132 Director, was helping with the emergency preparedness planning. Dwyer confirmed Keller has
133 been very involved, as have two fire departments, the Cities of Champaign and Urbana, Carle
134 Hospital, the Veterans Administration, Christie Clinic, Frances Nelson, CUPHD, State's
135 Attorney's Office, Coroner, Provena Covenant Hospital, Pro Ambulance Service, METCAD,
136 University of Illinois, and the Sheriff's Office. Peterson attended the workshop and said the
137 level of preparedness that had already taken place was impressive. He felt that was why CUPHD
138 was awarded the grant. Dwyer hopes to do at least two exercises with the core planning group
139 and more with a larger group, including businesses. They are looking into using grant funds with
140 the National Center for Supercomputing Applications to develop better surveillance system when

141 people report to emergency rooms to get real-time data on illnesses. Pryde stated the businesses
142 in Rantoul are seriously working with CUPHD on emergency preparedness. Dwyer is looking at
143 putting on a seminar and town hall meetings on pandemic flu and general emergency
144 preparedness. Pryde noted they are willing to speak to any group about emergency preparedness
145 to spread the information further.

146
147 Rappaport inquired whether the County Health Department should be doing anything in
148 particular for emergency preparedness. McGrath said the issues of isolation and communication
149 in rural areas were discussed at the workshop. Pryde said CUPHD is looking into implementing
150 a Code Red or Alert Sense to notify people of an emergency. Dwyer said entities could sign a
151 contract with a vendor for public notification. This would be in the form of a Champaign County
152 emergency preparedness website where people could sign up to be alerted for emergencies via
153 text messages sent to their cell phones. James noted that schools use phone trees to contact
154 people in the event of weather closings. James felt emergency preparedness was best left to
155 those who could provide the best organization and CUPHD was getting this done. Dwyer noted
156 they are developing protocols about notification in-house. Peterson remarked on the importance
157 of strategizing on how to keep the sick isolated from the healthy to avoid spreading a disease.
158 He raised the issue of distinguishing other serious viral illnesses from pandemic flu. Dwyer
159 stated they brought in three experts on SARS from Toronto to provide information. James asked
160 about the probability of something like bird flu hitting the area. Dwyer and Scholze said it was a
161 matter of when not if this would occur. Pryde recommended encouraging people to sign up for
162 the Medical Reserve Corp, an organization of medical and nonmedical volunteers on-call for
163 emergencies. The Medical Reserve Corp needs everyone from veterinarians, doctors, dentists,
164 funeral directors, to data entry people. Applications can be obtained through the Medical
165 Reserve Corp's website or through CUPHD and anyone can apply. Pryde and McGrath
166 indicated the first emergency could be drug resistant TB. The Board of Health congratulated
167 CUPHD on being awarded the CDC grant.

168
169 Report from CUPHD Administrator

170
171 The Administrator's report was mailed to the Board in advance of the meeting. James
172 asked McGrath if the Board could adopt a mileage reimbursement rate instead of paying the rate
173 set by the Internal Revenue Service, as the County Board does with the mileage rate paid to
174 jurors. McGrath stated the juror mileage rate is not required to conform with the IRS rate by
175 statute, but the government mileage rates are usually linked to the IRS rate. Pryde said the rate
176 would decrease to 55 cents in January. The Board discussed the mileage rate compared to
177 fluctuating gas prices. Rappaport asked if the County's van was turned over to the Animal
178 Control Department. Bork confirmed that CUPHD had returned the van and title, which were
179 given to the Animal Control Director.

180
181 Rappaport asked Pryde to speak about IMRF. Pryde stated that CUPHD has to pay into
182 IMRF for every public health employee. CUPHD was notified by IMRF that the rates were
183 increasing in 2009 and the costs are expected to double in 2010. This will have a significant
184 impact in staff and personnel costs. Peterson asked why employers would have to pay so much
185 more. Pryde explained there is no regulation to the industry and after the IMRF fund took loses
186 in the fund's investments all employers are now required to make it up. Peterson asked if this

187 fund was raided by the state government. McGrath stated the state legislature is prohibited from
188 raiding the IMRF fund.

189

190 Division Monthly Reports

191 **Maternal & Child Health (Gowda)**

192

193 Gowda noted that CUPHD offers gas cards and car seats for women in their first month
194 of pregnancy beginning October 1st. He wanted this information to be sent to clinics and Frances
195 Nelson to make women more aware of the program. Pryde confirmed CUPHD is making efforts
196 to advertise this program and agreed to check that Frances Nelson has the information. McGrath
197 suggested sending a program flyer to the Child Support Enforcement Office on Mattis Avenue.

198

199 **Infectious Disease, Mobile Unit (James)**

200

201 James noted CUPHD's Infectious Disease Division and Mobile Unit Program are doing
202 their job. Pryde added they have been giving lots of flu shots.

203

204 **Environmental Health (Peterson)**

205

206 This topic was covered earlier in the meeting.

207

208 **Wellness & Health Promotion (Ramirez)**

209

210 Ramirez presented at the recent Women's Health Conference about chronic disease
211 health management and offered to the Board a DVD on the subject at a future meeting. The
212 Board supported the idea of a future presentation. Ramirez spoke about the Illinois Public
213 Health and Community Mental Health reception in Springfield on March 25, 2009 about
214 combining resources to advocate for public/mental health. They are trying to get a legislative
215 person from a national association to talk about the different national policy issues. Ramirez will
216 be attending the Illinois Public Health Association Annual Conference on April 28th-30th in
217 Bloomington. Conference presenters will include a group who has designed a behavior health
218 intervention program for veterans, Faces and Voices of Recovery, and a researcher studying drug
219 policy in Illinois. The Campaign for Mental Health Reform will address the topic of mental
220 health parity. She encouraged Board member to attend the conference.

221

222 After the discussion about IMRF and funding new initiatives, Ramirez was perplexed
223 about the Board of Health's budget as new Board member. She wanted to know over what part
224 of the budget the Board has discretion. Peterson stated about half of the over \$800,000 budget
225 are grants administered by CUPHD. The core programs administered by CUPHD must be
226 funded and they are expensive. The Board's discretionary spending includes the child dental
227 access program administered by Smile Healthy, the Senior Wellness Program administered by
228 the Regional Planning Commission, and Perinatal Depression Program administered in
229 collaboration with the Mental Health Board. Rappaport and Peterson encouraged Ramirez to
230 attend the Budget Subcommittee meetings to gain a better understanding of the budget as it is
231 being prepared.

232

233 **MOTION** by James to receive and place on file the CUPHD Division Monthly Reports
234 for October 2008; seconded by Gowda. **Motion carried.**

235
236 **Issues Regarding RPC Senior Wellness Program (Scholze)**

237
238 Scholze reported that she met with RPC's Senior Services staff and talked at length about
239 providing data demonstrating the services that have been provided. RPC did not have any new
240 information on the services they have provided with the Senior Wellness Program funding, so
241 Scholze suggested what they could bring to the Board to show how the program is doing and
242 then get feedback from the Board. She learned that RPC only does short-term information and
243 referral, not any long-term case management. Scholze later met with a separate agency, Family
244 Services, which also provides services to seniors in Champaign County. She distributed several
245 handouts to the Board showing the data provided by Family Services documenting the services
246 they provide to seniors. The handouts show the number of clients Family Services has served in
247 2008 in the County cases. Scholze explained how the data is recorded and the different types of
248 services Family Services provides and make referrals to. This information is a result of
249 Rappaport asking Scholze to track down exactly what RPC is doing with the Board of Health
250 funding. RPC could did not present anything more to her than what they have reported in their
251 quarterly report to the Board. Scholze was presenting the information on Family Services to
252 show the Board what another agency has been able to do for seniors in Champaign County and
253 the data they are able to provide as a point of comparison. Family Services has about ten years
254 of data provides information and referral services, long-term case management, a monthly
255 newsletter, and a training program for caregivers. She noted that Family Services is serving a lot
256 of people in the county. The Director of Family Services' services for seniors is also running the
257 Senior Taskforce, which involves agency coordination in the area. Family Services has not
258 received any state payments since June 2008. Scholze was very impressed with what this agency
259 was doing with very little money.

260
261 James remarked on the fact that different agencies are providing overlapping services to
262 the same group of people. Scholze concurred and sees the same problem of coordination as
263 something the Senior Taskforce is working on.

264
265 Rappaport observed that last year the Board discussed developing a process to evaluate
266 applicants and programs for providing services to ensure the Board was getting the highest level
267 of services for its money. In the coming year, he hoped to move towards a more competitive
268 process for funding. He expressed that the Board should not automatically reapprove another
269 year of funding just because a program is currently funded. Scholze commented on the
270 importance of accountability for programs funded with public funds. The Board discussed
271 evaluating all the programs it pays for.

272
273 Segal asked whether there was a difference in size between RPC and Family Services.
274 Scholze did not know, but offered to find out. It was noted that RPC hired an additional staff
275 person when the Senior Wellness Program was funded through the Board of Health. Scholze
276 pointed out how phones calls and appointments with populations like senior citizens often reveal
277 more needs than the individual first indicated. Segal noted that Family Services serves small
278 communities including Foosland. Scholze stated that Family Services gave her permission to

279 share their data publically. The Board discussed looking into an evaluation process and
280 developing relationships with agencies like Family Services who could submit proposals for
281 funding by the Board of Health. Scholze offered to facilitate a meeting with Family Services if
282 the Board was interested in more information.

283

284 **Issues Regarding Crisis Nursery Perinatal Depression Program (Segal)**

285

286 Segal stated she and Rappaport attended a meeting last Thursday with Mental Health
287 Board representatives Peter Tracy, Mark Driscoll, Thom Moore, and Deborah Townsend about
288 the Perinatal Depression Program progress. The representatives from both boards expressed
289 satisfaction with Crisis Nursery's reporting. The Mental Health Board is beginning its new
290 budget year and looking at possibly expanding the collaboration between the two boards. Peter
291 Tracy had informed Segal and Rappaport that a program's funding can be renewed for another
292 year without undergoing the competitive process. Adjustments can be made to the program's
293 contract with a renewal as well.

294

295 **Issues Regarding Smile Healthy (Kassem)**

296

297 Kassem thought Smile Healthy was seeing more children because the need is growing in
298 the community. He understood Smile Healthy might be applying for other grants to fund their
299 activities. Greenwalt reported that Smile Healthy received an Illinois Children's Healthcare
300 Foundation award of \$100,000 and a \$50,000 match from Carle Hospital. Half of the grant will
301 go towards buying equipment so their mobile unit can perform digital X-rays and part of the
302 grant will be to set up a clinic at Frances Nelson. The equipment will be exclusively for
303 children. Greenwalt brought the media into the school clinic to publicize the program. Pryde
304 confirmed the demand for mobile services in the Champaign-Urbana and county area has
305 skyrocketed, as have demands for free breakfasts and lunches for children. The grant is for only
306 one year, after which the services are expected to be self-sustaining through Medicaid
307 reimbursement. Greenwalt added their agency has not been paid by the state since July either.
308 Greenwalt stated a few more dentists have agreed to provide dental services through the
309 program. She said Smile Healthy is hoping to increase its collaborative relationship with the
310 local dental society. Smile Healthy has about twenty dental providers who participate in its
311 program.

312

313 Segal asked if the program provided orthodontics. Greenwalt said they did, but only that
314 which is medically necessary. Scholze asked if data showing the trends could be added in an
315 Excel spreadsheet format and Greenwalt agreed. Kassem said the State Dental Society was
316 aware of this program's success and it may be used as a model for increasing access to care. The
317 way Smile Healthy and the County Public Health Department work together is apparently unique
318 in the state. Pryde noted that Champaign County probably provides more dental coverage than
319 other counties.

320

321 **MOTION** by Kassem receive and place on file the Smile Healthy October 2008 monthly
322 reported; seconded by James. **Motion carried.**

323

324

325 **Other Business**

326 **Approval of FY2009 Calendar of Meetings**

327

328 **MOTION** by Peterson to approve the FY2009 calendar of meetings as presented;
329 seconded by Scholze.

330 James stated the County Board liaison to the Board of Health would be appointed at the
331 County Board's December 1, 2008 Organizational Meeting.

332

333 **Motion carried.**

334

335 **ADDENDUM**

336 **Consideration of Funding Anti-Stigma Alliance at Ebertfest**

337

338 Segal said the Board of Health was offered the option of being a co-sponsor of the Mental
339 Health Board's anti-stigma event at Ebertfest for \$1,000. Rappaport noted the Board did not
340 have to make a decision at this meeting and Segal concurred the Board could decide in January.
341 Ramirez had experience at the event and explained how a film selected by Roger Ebert is shown,
342 sponsoring entities distribute information on their services, and a community forum is held.
343 James did not support using \$1,000 for this purpose, when the money could be used to directly
344 supplying services such as giving flu shots. Segal thought the Board needs to look at developing
345 support in the county for Board of Health initiatives so taxpayers can understand what is being
346 done with their money and to make the Board more visible. Peterson suggested inviting Peter
347 Tracy to the Board's January meeting to have a formal evaluation of this proposal.

348

349 **Public Participation on Non-Agenda Items Only**

350

351 Dwyer was asked by Susan Monte to urge the Board to take the online Champaign
352 County hazards mitigation survey.

353

354 **Adjournment**

355

356 The meeting was adjourned at 8:04 p.m.

357

358 Respectfully submitted,

359

360 Kat Bork

361 Board of Health Secretary

362

363 *Secy's note: The minutes reflect the order of the agenda and may not necessarily reflect the order of business conducted at the meeting.*

1 CHAMPAIGN COUNTY BOARD OF HEALTH

2
3 **Special Meeting**
4 **Tuesday, January 6, 2009, 5:00 p.m.**
5

6 **Call to Order & Roll Call**
7

8 The Board of Health held a special meeting on January 6, 2009 in the Jennifer K. Putman
9 Meeting Room (formerly Meeting Room 2) at the Brookens Administrative Center, 1776 East
10 Washington, Urbana. The meeting was called to order at 5:04 p.m. by Julian Rappaport. Board
11 members Brenda Anderson, Stan James, Cherryl Ramirez, Julian Rappaport, and Betty Segal
12 were present at the time of roll call. The staff members present were Kat Bork (Board of Health
13 Secretary) and Susan McGrath (Senior Assistant State’s Attorney). Also present was Nancy
14 Greenwalt (Smile Healthy Executive Director).
15

16 **Approval of Agenda/Addendum**
17

18 **MOTION** by James to approve the agenda; seconded by Ramirez. **Motion carried.**
19

20 **Public Participation**
21

22 There was no public participation.
23

24 **Issues Regarding Smile Healthy**

25 **Approval of FY2009 Contract with Smile Healthy**
26

27 **MOTION** by Ramirez to approve the renewal of the participation agreement with Smile
28 Healthy for FY2009; seconded by Segal.
29

30 McGrath reported the only differences in the agreement renewal from previous years
31 were the contractual amount and a reflection of the agency’s name change to Smile Healthy from
32 CIDES. The committee discussed the budget for Smile Healthy in FY2009, which was the same
33 amount as FY2008 at \$130,360, and how the budget had increased over the last few years. I was
34 noted that Smile Healthy also received a separate equipment grant of \$10,000 from the Board of
35 Health in FY2008.
36

37 **Motion carried.**
38

39 **Issues Regarding CUPHD**

40 **Approval of CUPHD Invoices for October 2008 and November 2008**
41

42 McGrath confirmed John Peterson, the Board of Health’s Treasurer, was aware of the
43 invoices. Bork stated the invoices had already been paid, pending the Board’s approval because
44 they were for the previous fiscal year. The County had to close out its FY2008 financials prior
45 to this meeting.
46

47 **MOTION** by James to approve the CUPHD invoices for October 2008 and November
48 2008 for payment; second by Anderson. **Motion carried.**

49 **Other Business**

50

51 James requested that future meetings be scheduled to start between 5:30-6:00 p.m. to
52 better accommodate Board members who drive from Rantoul and other areas.

53

54 **Adjournment**

55

56 The meeting was adjourned at 5:11 p.m.

57

58 Respectfully submitted,

59

60 Kat Bork

61 Board of Health Secretary

62

63 *Secy's note: The minutes reflect the order of the agenda and may not necessarily reflect the order of business conducted at the meeting.*

CHAMPAIGN COUNTY MENTAL HEALTH BOARD

Grant Funded Program - Quarterly Program Activity/Consumer Service Report: **Second Quarter**

Agency: Crisis Nursery

Program: Perinatal Depression

Report Period: October 1 to December 31
DUE January 15

Service Categories	Community Service Events (CSE)	Service/Screening Contacts (SC)	NON-Treatment Plan Clients (NTPC)		Treatment Plan Clients (TPC)		Other	
			Continuing	New	Continuing	New	Continuing	New
Annual Target	115	700 includes screening, home visits, telephone contacts, & referral contacts	80 includes babies, other family members, and mothers screened but not in program.		25 mothers assessed as eligible		2886 hours of Crisis Care & Respite Care provided by CN	
Quarterly Data	87	101	17	26	6	5	29	40

Comments:

CHALLENGES:

*A huge challenge that we are experiencing at this time is transportation. Many of the families that reside in the rural community do not have access to transportation. This makes attending groups and utilizing respites a difficult task for these families. We are currently reaching out to other community resources, trying to collaborate and see if there is a way to get some type of transportation in place for families.

*We continue to have a large number of referrals for mothers within the Champaign-Urbana city limits. Our numbers appear to be on target for mothers in the rural community; however we receive a large number of referrals for individuals within the county. To date we have received referrals for 46 families within the county (24 from first quarter and 22 from second quarter). We continue to find that there are not many community services to support these particular mothers.

SUCSESSES:

*We have successfully completed one 6-week session Parent/Child Interaction groups at Frances Nelson and currently have one 6-week session being held at Parent Wonders in Rantoul.

*We have successfully made arranged to facilitate a Parent/Child Interaction group at Family Service in Champaign.

*We have successfully made arrangements to collaborate with Hellen McDonald, a Licensed Clinical Social Worker to facilitate support groups. These groups will begin in January 2009.

*We are successfully holding office hours at CUPHD in Rantoul. Office hours at this location help individuals put a face with services/programs being offered at Crisis Nursery. We felt that being at the Rantoul location was more beneficial for the population that we are trying to reach, but continue to work the case workers from the Champaign office in order to continue to be connected with individuals within the city limits

*We continue to be successful with our outreach efforts and we have continuing efforts to get information to the community.

TESTIMONIAL:

A mother said this, "I haven't had company since I moved to this area [March 2008]. I haven't wanted people over because I have been so depressed. I don't have family or friends in this area. I would love for you to come back just to have someone to talk to." I went back and visited with this mother several times and even got her smiling. She is now taking steps to get out of the house and enjoys meeting and talking to other individuals.

Champaign County Board of Health & Champaign County Mental Health Board

Quarterly Planning Meeting Thursday, November 20, 2008, 9:30 a.m.

August 20, 2008 Meeting Summary

The Quarterly Planning Meeting between representatives of the Champaign County Board of Health (BOH) and the Champaign County Mental Health Board (MHB) was held on November 20, 2008 at 9:30 a.m. at the MHB office. In attendance were Peter Tracy (MHB Executive Director), Mark Driscoll (MHB staff), Deborah Townsend (MHB President), Thom Moore (MHB Vice-President), Julian Rappaport (BOH President), Betty Segal (BOH Member), and Kat Bork (BOH staff). Tracy provided a quick summary of the first meeting held in August.

Crisis Nursery Perinatal Program First Quarter Report

The first quarter report from Crisis Nursery was presented to the BOH at their October meeting. Sureland Trice from Crisis Nursery also attended the meeting to report to the Board. Driscoll noted on the report that the continuing clients figure really applies from one year to the next, so the next report will only show the new clients. It was agreed that Crisis Nursery's numbers are pretty much on target, including meeting with other organizations and having contact with clients. Crisis Nursery has been a little disappointed with the lack of in-kind services to supports the program mothers and hopes these services will increase. Driscoll stated the program is focused on mothers in the county area, but mothers often have to come into Champaign-Urbana to receive in-kind services. This might be a reason the utilization of in-kind services is low. Driscoll will look for Crisis Nursery to develop additional relationships in the rural areas in the next quarter. The report was inline with what Driscoll expects and he noted Crisis Nursery has done more than other programs in their reporting.

Rappaport wanted to understand the report in the context of how other MHB programs report. He felt this program could possibly be used as a model of reporting for other agencies funded with public health money. He felt very positive about Crisis Nursery's method of reporting and the amount of information provided. Both boards' representatives agreed that as a startup program, Crisis Nursery is doing very well with the reporting process. Rappaport questioned how the boards providing the funding and agencies running the programs know if the program is achieving the mission of providing more services to the county. Driscoll explained the quarterly reports focus on the number of people utilizing services. He could ask Crisis Nursery to supply information about client outcomes. Rappaport wanted to learn about how the MHB assures itself that the work is getting done by the agencies it is funding. Tracy explained the MHB's program evaluation includes utilization. Crisis Nursery may use the Edinburgh Scale to determine client outcomes and the program also provides crisis care to high risk families. Accurately depicting the end results achieved by a program is difficult and the MHB's struggle with this problem is a reason they are moving to evidence-based practice. The boards do not know exactly what they are buying when they select a program for funding. Driscoll added that a site visit to Crisis Nursery will be done during the year, maybe in January, and it would include MHB staff reviewing Crisis Nursery's files to verify treatment plan numbers and assessments.

Moore wondered about thinking more in-depth about whether a program's clients are getting better after being served by the program. Driscoll stated a program has to report its results based on the outcomes the agency listed in its application to reapply for more funding in the next year. The next

MHB application cycle ends on February 15, 2009. During the course of gathering data, it takes three years to obtain full data for the first year. Some programs lend themselves to outcome measurement, but some do not. Moore suggested the members could generate questions to follow through with Driscoll on what makes the Perinatal Depression program seem so good. Segal thought this could be a model for the BOH to develop outcome measurements for programs. She theorized it could be a good idea for a graduate student as a master's thesis. Rappaport suggested the BOH may want to look at approximating the MHB contracts with outcomes required for other programs the BOH solely funds. Driscoll noted the MHB has a similar contract with the Regional Planning Commission's Senior Services Information/Advocacy program. He felt the relationship with the MHB would be helpful in developing the BOH's criteria for evaluating programs that either request or receive funding. He acknowledged the BOH funds programs such as the Senior Wellness Program through Senior Services and the Mobile Unit Program through the Champaign-Urbana Public Health District without possessing a means to evaluate the effectiveness of the services or how well the money is being spent. Tracy recommended the BOH review its state grant contracts to glean important point to track the programs and ask questions about how the programs are meeting the state requirements. Rappaport was interested in working with the MHB to possibly find ways to free up BOH money for further collaboration between the boards. Tracy was willing to share any documentation of the MHB's process and answer specific questions to assist the BOH as they develop a program evaluation process. Moore liked the idea of a graduate student documenting the process of how the relationship between the boards began.

CCMHB-CCBOH PY10 Allocation

Tracy distributed the MHB's decision support criteria for FY2010. The contract year runs from July to June, placing it on a different fiscal year than the BOH. The members discussed how to manage the funding with differing fiscal years. Tracy pointed out that a contract can be extended for more than one year. Tracy suggested holding a joint MHB/BOH study session for agencies who work with the maternal depression population to encourage agency cooperation. He suggested holding such a study session in January, February, or March. Rappaport and Segal supported this proposition. The members discussed possible dates, such as January 20th, February 17th, or March 17th from 4:30 p.m. to 6:00 p.m.

Anti-Stigma Alliance/Ebertfest Event

Tracy reported the MHB and the Developmental Disabilities Board would again be sponsoring an Anti-Stigma Alliance at Ebertfest and invited the BOH to be a partner, if the board was interested. The cost to be a partner is \$1,000 and the BOH would receive full billing in the event's advertising. Roger Ebert has selected the documentary "Begging Naked" to be showed at this year's Ebertfest. The documentary spent nine years following a homeless, schizophrenic woman living in New York City who became an artist. Due to the adult nature of "Begging Naked," a second film will be offered for a free public screening at the end of Ebertfest. Tracy is working on securing a second film, either "What's Eating Gilbert Grape" or "Body and Soul." The Anti-Stigma Alliance is an opportunity to educate the public and promote inclusion.

Rappaport directed consideration of the BOH becoming a partner in the Anti-Stigma Alliance to be placed on an addendum for the next BOH meeting. He suggested it would be good to think about what else the boards might like to do in the future, maybe committing to a more programmatic relationship appropriate to public funding. Moore asked if the Crisis Nursery Perinatal Depression

Program could serve as a pilot program to obtain state or federal funding. Tracy was not sure. Rappaport asked if the MHB has looked at ways to support mental health services specifically for rural residents through state or federal funding. Tracy said they are looking into getting a handle on what the needs are in Champaign County outside of the Champaign-Urbana area. Rappaport mentioned the possibility of pigging-backing mental health services onto the mobile unit services as a way to reach more rural residents. Tracy acknowledged the MHB funds programs somewhat related to physical health and offered to pull these program plans to look at ideas for integration. Segal asked if the MHB does anything to address bullying in schools. Driscoll reported a Prairie Center program focuses on addressing violence in schools.

Other Business

Driscoll spoke about the MHB holding a study session to discuss the effect of delayed state payments for services and the obligations of local government to provide local social services. They might ask the County Board to participate in the discussion.

Next Meeting

Next meeting was scheduled for Thursday, February 19, 2009 at 10:00 a.m. The Quarterly Planning Meeting ended at 11:03 a.m.



Senior Wellness: 10/1/08 – 12/31/08

26% of the total seniors seen, this quarter were **rural**

20 seniors telephoned were **new to Senior Services**

Number of seniors served this quarter from those Rural Communities:

Bondville	0
Broadlands	2
Fisher	7
Foosland	1
Gifford	0
Homer	1
Ivesdale	2
Longview	1
Ludlow	2
Mahomet	22
Ogden	2
Pesotum	0
Philo	4
Rantoul	40
Sadorus	1
Seymour	0
Savoy	8
Sidney	1
St. Joseph	27
Thomasboro	2
Tolono	8

Senior Wellness Clients Served

	10/1/07-9/30/08 Total for year	10/1 - 12/31/07 Baseline	10/1 -12/31/08	1 - 3/09	4 - 6/09	7 - 9/09	10 - 12/09
Rural	249	78	92				
Rantoul	111	27	39				
C-U	723	195	218				
TOTAL	1083	300	349				

Rural seniors were assessed and connected with these services/agencies:

- Transportation (28)
- Prescription related (25) + 33 prescription/drug counseling/advocacy units
- LIHEAP (13)
- Family Service (7)
- DHS (6)
- Land of Lincoln Legal Assistance (4)
- Senior Tax Freeze (5)
- Senior Health Insurance Program (SHIP) (3)
- Patient Acct. Services (3)
- Telephone (Emergency) Response Systems (3)
- Housing (3)
- Weatherization (3)
- Cumberland Associates (Case Management /Community Care Program)
- In Home Care provider (3)
- Employment (2)
- Mental Health
- Enrolled in prescription drug plans
- Social Security
- People Assuming Control of their Environment (PACE)
- Prescription Glasses
- Minds in Motion
- Independent Services Coordinator
- empty tomb, inc.
- Absentee Ballot
- Disabled Placard
- Where to go for \$ for medications, \$ for utilities
- Adult Day Program
- Where to donate a Hospital Bed
- ITAC

Rural Outreach this quarter:

- October: The Glenwood Health Fair - Mahomet
- November: Mahomet Senior Moments Group – Mahomet
- November: Tolono Librarian, Tolono Busey Bank
- November: Toured Bridlebrook Facility and distributed materials - Mahomet

- October and December Senior Service Advisory Meetings with distribution of surveys, results and senior information

Gatekeepers identified thus far:

Senior Service Advisory Board members:

- (2) Mahomet (Peace Meal Coordinator and a retiree from the County Assessor's Office)
- Rantoul (Veteran who is Chanute Air Force Museum Director and Tax-Aide coordinator)
- Rural Homer (former FNHC Board member as well as member of a woman's church group)
- St. Joseph (Village Trustee who is active with senior groups)
- Philo (member of Library Board)
- Savoy (Health Alliance educator/respiratory therapist)
- Rural Champaign (Retired UI Transportation Coordinator and a Mason)
- Champaign (works at local bank with senior programs)
- Champaign (University retiree and member of Sinai Temple)

And others:

- Tolono Librarian
- Tolono Bank representative
- Mahomet Parish Nurse
- Fisher Senior Citizen group contact and former volunteer driver

3 Rural Case Scenerios from this quarter

60+ year old rural senior and his spouse are raising their grandchildren. Initial contact was a home visit for applications for LIHEAP and home repair. The worker met with the client on the front porch. Client calls office later with questions about resources for overdue property taxes, payment for medications as both have “bad diabetes and cannot afford their medications”. Information provided about his eligibility for resources (Senior Property Tax Freeze, Land of Lincoln for information from housing specialist and IL Cares Rx) and another appointment is scheduled.

Follow up appointment in office with his grandson resulted in the following:

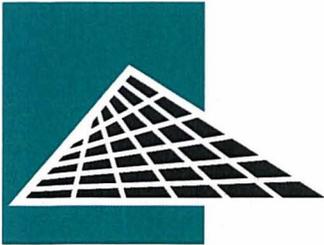
- Completed application to IL Cares Rx
- Medicare Prescription Drug Plan comparison with information provided on plans that would coordinate with IL Cares Rx
- A more complete list of food pantries in Champaign County provided
- Homestead Exemption and Sr. Property Tax Freeze, how to apply @ Brookens
- Preliminary information on obtaining prescription glasses (he is to pay for the exam and we will refer to Gift of Sight program)

Note: He had contacted Land of Lincoln, left a message and was awaiting their reply.

Follow up included: Enrollment in a coordinating prescription drug plan, check on on status of IL Cares Rx application. His benefits will be effective in 1 month.

Now 61 year old rural senior was referred by her mother. At the time she was initially referred, she was < 60 disabled with a medical condition that affects her ability to organize and stay focused. She lives in her own home, is independent with her ADL’s and assists with childcare for her own grandchildren. Worker assisted with IL Cares Rx application, referred to SHIP for insurance assistance when her benefits from her previous job expired. Client has maintained intermittent contact with agency. Worker has focused casework on insuring paperwork (eg. documentation of disability to IL Cares Rx) submitted through follow up contact with client and with help of client’s mother. Client now agrees to referral to Family Service for someone to help her stay organized with personal business paperwork.

Now 60 year old Champaign County resident is reclusive, suspicious and hoards in his rural home. The only assistance he will accept to maintain his food stamps and LIHEAP. A neighbor has maintained contact with client and Senior Services worker for multiple years. When client turned 60 a referral was made to Family Service. Client continues to only agree to help with food stamps and LIHEAP. Other agencies that have been consulted by Senior Services include Land of Lincoln and the Mental Health Center. The neighbor continues to be supportive and has now initiated contact with relative who has been reluctant to become involved.



CHAMPAIGN COUNTY

Regional Planning Commission

Social Services Division

Case Management

- Court Diversion Services
- Family & Community Development
- Financial Literacy
- Individual Development Accounts
- Norman Housing Advocacy
- School-to-Work Transition Skills

Community Services

- CSBG Scholarships
- Emergency Rent Assistance
- Information and Referral
- LIHEAP (384-1226)
- Shelter Plus Care
- Senior Home Repair
- Weatherization

Independent Service Coordination for DD

- All Kids Agent
- Bogard Monitoring
- Pre-admission Screening (PAS)
- PUNS
- Individual Service and Support Advocacy (ISSA)
- Service Coordination (SC)

Senior Services

- Information, Referral and Advocacy
- Pharmaceutical Benefit Assistance
- Rural Rider

See our website at:

www.ccrpc.org

MEMORANDUM

Date: January 5, 2009

To: CC Public Health Board

From: Darlene Kloepfel, Social Service Director 

Re: Grant Closeout

Please find enclosed our fiscal report to close out our FY08 expenses. Our regular program and fiscal reports will be submitted as usual on our quarterly schedule (Jan/Apr/Jul/Oct).

If you have any questions, please don't hesitate to contact me.

